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CONFIRMATION NO. 1236

| SERIAL NUMBER | FILING or 371(c) DATE RULE | CLASS 710 345 | GROUP ART UNIT 2629 | ATTORNEY DOCKET NO. IMM099C (I103 1760.2) |
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| 10/615,986 | | | | |

APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 10/213,940 08/06/2002 PAT 7,148,875
 which is a CON of 09/487,737 01/19/2000 PAT 6,429,846
 which is a CIP of 09/467,309 12/17/1999 PAT 6,563,487
 which is a CIP of 09/156,802 09/17/1998 PAT 6,184,868
 and is a CIP of 09/103,281 06/23/1998 PAT 6,088,019
 and is a CIP of 09/253,132 02/18/1999 PAT 6,243,078

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

10/06/2003

| Foreign Priority claimed | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY CA | SHEETS DRAWINGS 5 | TOTAL CLAIMS 24 <input type="checkbox"/> 9 | INDEPENDENT CLAIMS 3 <input type="checkbox"/> 1 |
|--------------------------------|---|--|------------------------|----------------------|---|--|
| 35 USC 119(a-d) conditions met | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Verified and Acknowledged | /ABbas I ABDULSELAM/ Examiner's Signature Initials | | | | | |

ADDRESS

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TITLE

Haptic feedback for touchpads and other touch controls

| | | |
|----------------------------|---|--|
| FILING FEE RECEIVED 768 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
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| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
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